

07/22/03 15541 U.S. PTO

TAROLLI, SUNDHEIM, COVELL & TUMMINO L.L.P.
526 Superior Avenue, Suite 1111
Cleveland, Ohio 44114

(216) 621-2234

21707 U.S. PTO
10/624400
07/22/03

PATENT

Attorney Docket No. TRW(TE)6487

Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

NEW APPLICATION TRANSMITTAL

Transmitted herewith for filing is the patent application of Inventor(s): Raymond J. David and Robert Dziadula

For (title): **APPARATUS AND METHOD FOR CONTROLLING AN OCCUPANT PROTECTION
SYSTEM IN RESPONSE TO DETERMINED PASSENGER COMPARTMENT
OCCUPANCY INFORMATION**

Enclosed are:

1. **Papers Required for Filing Date Under 37 CFR 1.53(b):**

27 Pages of specification

1 Pages Abstract

7 Pages of claims

2 Sheets of drawing

☒ formal (Figs. 1-3)

☐ informal

In addition to the above papers there is also attached:

CERTIFICATION UNDER 37 CFR 1.10

I hereby certify that this New Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service on this date July 22, 2003 in an envelope as "Express Mail Post Office to Addressee" Mailing Label Number EU-712716707US addressed to the: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Anita J. Galo
(Type or print name of person mailing paper)


(Signature of person mailing paper)

2. Declaration of oath:

- ☒ Enclosed (Executed)
☐ Not Enclosed.

3. Language:

- ☒ English
☐ Non-English
☐ A verified English translation of the
☐ specification and claims
☐ declaration
is attached.

4. Assignment:

- ☒ An assignment of the invention to TRW Automotive U.S. LLC
☒ is attached.
☐ will follow

5. Certified Copy:

Certified copy (ies) of application (s)

(Country) (Appln. No.) (Filed)

(Country) (Appln. No.) (Filed)

(Country) (Appln. No.) (Filed)

from which priority is claimed

- ☐ is attached
☐ will follow

6. **Fee Calculation:**
 (Small entity filing fee is 50% normal fee)

CLAIMS AS FILED				
Number Filed	Number Extra		Rate	Basic Fee
				\$ 750.00
Total Claims	21	-20 =	1 X	\$ 18.00
Independent Claims	4	- 3 =	1 X	\$ 84.00
Multiple dependent claim(s), if any			0 +	\$280.00
				0.00

- ☐ Amendment canceling extra claims enclosed
- ☐ Amendment deleting multiple dependencies enclosed
- ☐ Fee for extra claims is not being paid at this time

Filing Fee Calculation **\$852.00**

7. **Small Entity Statement**

- ☐ The present application is being filed by or on behalf of a **small entity** as defined in 37 CFR 1.9 and 1.27 for purposes of paying reduced fees.

8. **Fee Payment Being Made At This Time:**

Enclosed:

- ☒ basic filing fee **\$852.00**
- ☒ assignment recordal fee **\$ 40.00**
- ☐ for processing an application with a specification in a non-English language **\$ 0.00**

Total fees enclosed \$892.00

9. **Method of Payment Fees:**

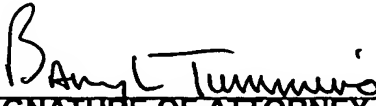
☒ check in the amount of \$892.00 enclosed.

☒ The Commissioner is hereby authorized to charge any **DEFICIENCY** in the filing fees for this application to our Deposit Account No. 20-0090.

10. **Instructions As to Overpayment:**

☒ refund

**TAROLLI, SUNDHEIM, COVELL,
& TUMMINO L.L.P.**
526 SUPERIOR AVENUE, SUITE 1111
CLEVELAND, OHIO 44114-1400
Tel. No. (216) 621-2234
Fax No. (216) 621-4072



SIGNATURE OF ATTORNEY, REG. NO. 29,709
CUSTOMER NO.: 26,294

Barry L. Tummino
Type or print name of attorney